

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Michael Grimm for Congress

ADDRESS (number and street)

PO Box 61806

Check if different
than previously
reported. (ACC)

Staten Island

NY

10306-7806

2. FEC IDENTIFICATION NUMBER ▼

C

C00470807

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NY

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
11 / 04 / 2014in the
State of

NY

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2014

through

M M / D D / Y Y Y Y
10 / 15 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert Carlin

Signature of Treasurer

Robert Carlin

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 23 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 49

Write or Type Committee Name

Michael Grimm for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	8938.00	1910021.73
(b) Total Contribution Refunds (from Line 20(d))	0.00	5865.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	8938.00	1904156.73
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	308515.66	1912483.80
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	15152.94
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	308515.66	1897330.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	325352.83	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	431788.41	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 49

Write or Type Committee Name

Michael Grimm for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

4050.00

930635.52

(ii) Unitemized.....

2888.00

35129.52

(iii) TOTAL of contributions from individuals ▶

6938.00

965765.04

(b) Political Party Committees.....

0.00

150.00

(c) Other Political Committees (such as PACs).....

2000.00

944106.69

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

8938.00

1910021.73

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

65662.91

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

15152.94

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

769.88

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

8938.00

1991607.46

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 49

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	308515.66	1912483.80
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	5865.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5865.00
21. OTHER DISBURSEMENTS	0.00	17530.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	308515.66	1935878.80

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	624930.49
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8938.00
25. SUBTOTAL (add Line 23 and Line 24).....	633868.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	308515.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	325352.83

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 49

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

Dong-Joon Lee

Mailing Address 291 Hillbrook Drive

City

Staten Island

State

NY

Zip Code

10305-2820

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : A185B9F683D3C47A4B0D

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

William Hotaling

Mailing Address 125 Quassaick Avenue

City

New Windsor

State

NY

Zip Code

12553-6635

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : A19FBAD677DEB408BA29

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Jonathan Taormina

Mailing Address 2847 Harbor Road

City

Merrick

State

NY

Zip Code

11566-4609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Time Warner Cable

Occupation

Senior Manager

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : ABE9E34D1B471498AB02

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 49

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

John Antoniello

A.

Mailing Address 232 Robinson Avenue

City

Staten Island

State

NY

Zip Code

10312-6216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1025.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : AE7E10B74E6194088B39

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Frank Aversa

B.

Mailing Address 52 Lenzie Street

City

Staten Island

State

NY

Zip Code

10312-6118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aversa Bros Industrial Inc

Occupation

Industrial Engineer

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : A0CA7EE8869794AA5ABC

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Linda M Picciallo

C.

Mailing Address 133 Bennett Place

City

Staten Island

State

NY

Zip Code

10312-6366

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Management of Building Company

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : AC09F870BACCE4326B0F

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

Karen Aversa

Mailing Address 52 Lenzie Street

City

Staten Island

State

NY

Zip Code

10312-6118

FEC ID number of contributing
federal political committee.

C

Name of Employer
YMCAOccupation
Sales Assoc

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : AB431FAB548FD4A1CA13

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Mariola Wanielista

Mailing Address 1029 73rd Street

City

Brooklyn

State

NY

Zip Code

11228-1915

FEC ID number of contributing
federal political committee.

C

Name of Employer
ZW Plumbing & HeatingOccupation
Co-Owner

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : A0B540E74FE3E4261978

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Lech Dabrowski

Mailing Address 61 Shore Acres Rd

City

Staten Island

State

NY

Zip Code

10305-3911

FEC ID number of contributing
federal political committee.

C

Name of Employer
MaimonidesOccupation
Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : AFE7F095E745D47F2930

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

450.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

Jeanette Milione

A.

Mailing Address 40 E Figurea Avenue

City

Staten Island

State

NY

Zip Code

10308-1325

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : A3CE57C6FD6EA4BC6AC3

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Dong-Joon Lee

B.

Mailing Address 291 Hillbrook Drive

City

Staten Island

State

NY

Zip Code

10305-2820

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : A50F7769387FC4FCC9B4

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Bartholomew H. Sharp

C.

Mailing Address 161 Sharrott Avenue

City

Staten Island

State

NY

Zip Code

10309-3322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : AC726BAFD9DAF48759D4

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

Zbigniew Wanielista

A.

Mailing Address 1029 73rd Street

City

Brooklyn

State

NY

Zip Code

11228-1915

FEC ID number of contributing
federal political committee.

C

Name of Employer

ZW Plumbing & Heating

Occupation

Co-Owner

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
10 15 2014

Transaction ID : A36566A3124964B299FA

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Fern Ann Taormina

B.

Mailing Address 25 Ryan Place

City

Staten Island

State

NY

Zip Code

10312-6066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

425.00

Date of Receipt

M M / D D / Y Y Y Y
10 15 2014

Transaction ID : A2BEF781E6B6C4054B68

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Anthony DeFazio

C.

Mailing Address 4 Royal Oak Road

City

Staten Island

State

NY

Zip Code

10314-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
10 09 2014

Transaction ID : A82314AA3ABA94865B76

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

550.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 49

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

Brian McBride

A.

Mailing Address 11 Palmieri Ln

City

Staten Island

State

NY

Zip Code

10309-3444

FEC ID number of contributing
federal political committee.

C

Name of Employer

DVM Equipment, Inc.

Occupation

President

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : A31600DB85B2748ABB8D

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

John Ross

B.

Mailing Address 10 Lerer Lane

City

Staten Island

State

NY

Zip Code

10307-2401

FEC ID number of contributing
federal political committee.

C

Name of Employer

MetLife

Occupation

Financial Planner

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : ABBA3069DA56847D5A41

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

4050.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 49

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

PRICE FOR CONGRESS**A.**

Mailing Address PO Box 425

City

Roswell

State

GA

Zip Code

30077-0425

FEC ID number of contributing
federal political committee.**C** C00386755

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : AF10B338DC89C4EDE944

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

2000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Eventbrite

Mailing Address 651 Brannan Street

City	State	Zip Code
San Francisco	CA	94107-1532

Purpose of Disbursement
Credit Card Merchant Fee

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

25.96

Transaction ID : BDCCA493FBEE84C4DA34

B. Grasslout.com

Mailing Address ONLINE

City	State	Zip Code
ONLINE		

Purpose of Disbursement
Credit Card Merchant Fee

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

19.24

Transaction ID : B7F224441F3CE4CB6958

C. Strategic Partners & MediaMailing Address 575 Main Street
Suite 251

City	State	Zip Code
Laurel	MD	20707-4353

Purpose of Disbursement

003

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

8000.00

Transaction ID : BFFFA0F95B2584790889

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

8045.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Orange32

Mailing Address 5017 5th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
Long Island City	NY	11101-5786

Purpose of Disbursement
Printing

006

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

1050.97

Transaction ID : B0958471F74F74F99A56

B. Eventbrite

Mailing Address 651 Brannan Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
San Francisco	CA	94107-1532

Purpose of Disbursement
Credit Card Merchant Fee

003

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

12.98

Transaction ID : BE4C3845111524D12B7C

C. Interstate EDP & Direct Mail, Inc.

Mailing Address 754 4th Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
Brooklyn	NY	11232-1414

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

19970.71

Transaction ID : BE1F229D9AEDA470F838

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

21034.66

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Luke's Copy Shop

Mailing Address 2506 Hylan Boulevard

City	State	Zip Code
Staten Island	NY	10306-4366

Purpose of Disbursement

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

Amount of Each Disbursement this Period

19375.68

Transaction ID : BAB0917D09A5245AFA0C

B. Mentzer Media Services, Inc.Mailing Address 600 Fairmount Avenue
Suite 306

City	State	Zip Code
Towson	MD	21286-1002

Purpose of Disbursement

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

Amount of Each Disbursement this Period

103642.00

Transaction ID : BEDF948AB8B814A0D9A5

c. Grasslout.com

Mailing Address ONLINE

City	State	Zip Code
ONLINE		

Purpose of Disbursement
Credit Card Merchant Fee

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

Amount of Each Disbursement this Period

8.00

Transaction ID : B25AB26AF133D4A90A11

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

123025.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Hilton Garden Inn

Mailing Address 1100 South Avenue

City	State	Zip Code
Staten Island	NY	10314-3410

Purpose of Disbursement
Food & Beverage

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

Amount of Each Disbursement this Period

2358.97

Transaction ID : B5B04D68C003A4065A49

B. Grasslout.com

Mailing Address ONLINE

City	State	Zip Code
ONLINE		

Purpose of Disbursement
Credit Card Merchant Fee

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2014

Amount of Each Disbursement this Period

2.38

Transaction ID : B894CD73CD9334EC09A5

c. Eventbrite

Mailing Address 651 Brannan Street

City	State	Zip Code
San Francisco	CA	94107-1532

Purpose of Disbursement
Credit Card Merchant Fee

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

6.49

Transaction ID : B3D91C334F6C944AC92A

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2367.84

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Grasslout.com

Mailing Address ONLINE

City	State	Zip Code
ONLINE		

Purpose of Disbursement
Credit Card Merchant Fee

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

75.49

Transaction ID : B19F085018FDF44E0814

B. Capitol Hill Club

Mailing Address 300 1st Street SE

City	State	Zip Code
Washington	DC	20003-1801

Purpose of Disbursement
Food & Beverage

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

1449.88

Transaction ID : B3E661D25450C4C65A58

C. Antonio MonacoMailing Address 7610 13th Avenue
2 FLOOR # 12

City	State	Zip Code
Brooklyn	NY	11228-2446

Purpose of Disbursement
Rent

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

1200.00

Transaction ID : BEA6347CA17304FCAB70

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2725.37

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Stacey Sclafani

Mailing Address 255 Rudyard Street

City	State	Zip Code
Staten Island	NY	10306-5013

Purpose of Disbursement
Fundraising Consulting

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : B667BB2F6675641E8B7E

Full Name (Last, First, Middle Initial)

B. Stacey Sclafani

Mailing Address 255 Rudyard Street

City	State	Zip Code
Staten Island	NY	10306-5013

Purpose of Disbursement
Transportation

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

20.00

Transaction ID : BF8AECCE4127849548C1

Full Name (Last, First, Middle Initial)

C. Kenneth Annarummo

Mailing Address 1039 81st Street

City	State	Zip Code
Brooklyn	NY	11228-2915

Purpose of Disbursement
See Memos

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

669.17

Transaction ID : BB513070BA4BE4D3D9DB

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3189.17

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Interstate EDP & Direct Mail, Inc.

Mailing Address 754 4th Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

City	State	Zip Code
Brooklyn	NY	11232-1414

Amount of Each Disbursement this Period

218.51

Purpose of Disbursement
Direct Mail

003

Transaction ID : B8039154B61074F53900

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Richmond County Republican Committee

Mailing Address 2300 Richmond Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

City	State	Zip Code
Staten Island	NY	10314

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Rent

001

Transaction ID : B2C41040DB489469DBBA

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Strategic Partners & MediaMailing Address 575 Main Street
Suite 251

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

City	State	Zip Code
Laurel	MD	20707-4353

Amount of Each Disbursement this Period

3500.00

Purpose of Disbursement
Online Fundraising

003

Transaction ID : BCF24F95490424D27BC9

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4718.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Orange32

Mailing Address 5017 5th Street

City	State	Zip Code
Long Island City	NY	11101-5786

Purpose of Disbursement
Printing

004

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

15.40

Transaction ID : B8A28152C8A244663ACB

B. Jewish Community Center of Staten Island

Mailing Address 1466 Manor Road

City	State	Zip Code
Staten Island	NY	10314-7027

Purpose of Disbursement
Ad

004

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

450.00

Transaction ID : B37CBEAB50AB94C6EAA5

C. Community Resources Capital Foundation

Mailing Address 3460 Victory Boulevard

City	State	Zip Code
Staten Island	NY	10314-6721

Purpose of Disbursement
Ad

004

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : BC7DCC64DC5B8494EA2E

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

965.40

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Pietrosfight.org

Mailing Address 18 77th Street

City	State	Zip Code
Brooklyn	NY	11209-2802

Purpose of Disbursement
Donation

012

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 09 / 2014

Amount of Each Disbursement this Period

553.00

Transaction ID : B9ABA568BCB4C4AAD8E1

B. STRIPE

Mailing Address 3180 18th Street

City	State	Zip Code
San Francisco	CA	94110-2043

Purpose of Disbursement
Credit Card Merchant Fee

003

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 09 / 2014

Amount of Each Disbursement this Period

7.55

Transaction ID : B39BEBF22A2324BFCBE5

c. Retribution LEMC

Mailing Address 2032 W 4th Street

City	State	Zip Code
Brooklyn	NY	11223-3837

Purpose of Disbursement
Ad

004

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 09 / 2014

Amount of Each Disbursement this Period

125.00

Transaction ID : BF28AE0BA7DBA46038B1

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

685.55

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Aristotle

Mailing Address 205 Pennsylvania Avenue SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement
Compliance Software

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

2100.00

Transaction ID : BA313A98012FE4418B48

B. Historic Richmond Town

Mailing Address 441 Clarke Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

City	State	Zip Code
Staten Island	NY	10306-1125

Purpose of Disbursement
Facility Rental

003

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

415.00

Transaction ID : B37155FB5642041DCA85

c. VoterTrove

Mailing Address 921 Cavalry Ride Trail

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

City	State	Zip Code
Austin	TX	78732-2370

Purpose of Disbursement
Online Fundraising

003

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

1900.00

Transaction ID : BCEAE06D061AE473A822

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4415.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Salient MG, LLCMailing Address 575 Main Street
Suite 251

City Laurel State MD Zip Code 20707-4353

Purpose of Disbursement
Online Fundraising

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

5939.00

Transaction ID : B693A6D60E45A422D912

B. Grassloot.com

Mailing Address ONLINE

City ONLINE State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

11.12

Transaction ID : B2BD12A04CC154A09BD1

c. Grassloot.com

Mailing Address ONLINE

City ONLINE State Zip Code

Purpose of Disbursement
Credit Card Merchant Fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2014

Amount of Each Disbursement this Period

8.88

Transaction ID : BBB59DC8C506D450E9F4

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5959.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Grassloot.com

Mailing Address ONLINE

City	State	Zip Code
ONLINE		

Purpose of Disbursement
Credit Card Merchant Fee

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		12		2014

Amount of Each Disbursement this Period

3.12

Transaction ID : BC32B74B6730F4850B8D

B. Grassloot.com

Mailing Address ONLINE

City	State	Zip Code
ONLINE		

Purpose of Disbursement
Credit Card Merchant Fee

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2014

Amount of Each Disbursement this Period

37.99

Transaction ID : B8204BB36607B4CDFB10

C. Interstate EDP & Direct Mail, Inc.

Mailing Address 754 4th Avenue

City	State	Zip Code
Brooklyn	NY	11232-1414

Purpose of Disbursement
Direct Mail

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

Amount of Each Disbursement this Period

21160.40

Transaction ID : B035C88B429D0483CA77

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

21201.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Interstate EDP & Direct Mail, Inc.

Mailing Address 754 4th Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

City	State	Zip Code
Brooklyn	NY	11232-1414

Amount of Each Disbursement this Period

14527.18

Purpose of Disbursement
Direct Mail

003

Transaction ID : BE58B4CB913104D268DC

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Mentzer Media Services, Inc.Mailing Address 600 Fairmount Avenue
Suite 306

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

City	State	Zip Code
Towson	MD	21286-1002

Amount of Each Disbursement this Period

73900.00

Purpose of Disbursement
Media Buy

004

Transaction ID : B4D94535F217643688C2

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

c. Grasslout.com

Mailing Address ONLINE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

City	State	Zip Code
ONLINE		

Amount of Each Disbursement this Period

16.00

Purpose of Disbursement
Credit Card Merchant Fee

003

Transaction ID : BEC7086C19C344E76946

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

88443.18

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Grasslout.com

Mailing Address ONLINE

City	State	Zip Code
ONLINE		

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 15 / 2014

Amount of Each Disbursement this Period

7.37

Transaction ID : B4FCB65CE86514E33BF9

B. BB&T

Mailing Address 1909 K Street NW

City	State	Zip Code
Washington	DC	20006-1152

Purpose of Disbursement
Credit Card Charges

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 09 / 2014

Amount of Each Disbursement this Period

4060.22

Transaction ID : B058B33D06CB242F9982

c. Yellow Boots Long Term Recovery Goup

Mailing Address 39 Mundy Ave,

City	State	Zip Code
Staten Island	NY	10310-2627

Purpose of Disbursement
Donation

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 20 / 2014

Amount of Each Disbursement this Period

380.00

Transaction ID : B0A80B0CD4C444B17B56

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4067.59

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Royal Crown

Mailing Address 1350 Hylan Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

City	State	Zip Code
Staten Island	NY	10305-1922

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

47.73

Transaction ID : B84775C57FA6849DE882

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. ExxonMobil

Mailing Address 231 Bay Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2014

City	State	Zip Code
Staten Island	NY	10301-3243

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

8.39

Transaction ID : BCF4150FDF5294A0A8D9

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

c. Target

Mailing Address 2873 Richmond Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		21		2014

City	State	Zip Code
Staten Island	NY	10314-5811

Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

325.64

Transaction ID : B4D343FEE2CFC40ECB7A

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. United States Postal Service

Mailing Address 2562 Hylan Boulevard

City	State	Zip Code
Staten Island	NY	10306-8689

Purpose of Disbursement
Postage

001

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		21		2014

Amount of Each Disbursement this Period

245.00

Transaction ID : B42C44C70221C41AB9B6

[MEMO ITEM]

B. Hotels.comMailing Address 10440 N Central Expressway
Suite 400

City	State	Zip Code
Dallas	TX	75231-2228

Purpose of Disbursement
Lodging

002

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		24		2014

Amount of Each Disbursement this Period

197.44

Transaction ID : B4AC9AA1DA2D54AFCA87

[MEMO ITEM]

C. ExxonMobil

Mailing Address 231 Bay Street

City	State	Zip Code
Staten Island	NY	10301-3243

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

Amount of Each Disbursement this Period

52.11

Transaction ID : B25175E30C41D47F5BE1

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. United States Postal Service

Mailing Address 2562 Hylan Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

City	State	Zip Code
Staten Island	NY	10306-8689

Purpose of Disbursement
Postage

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: District:

Amount of Each Disbursement this Period

490.00

Transaction ID : B70C705C11DB848FF9C9

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 1885 Hylan Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

City	State	Zip Code
Staten Island	NY	10305-2110

Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: District:

Amount of Each Disbursement this Period

71.82

Transaction ID : B0C948D074B914D0D830

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. United States Postal Service

Mailing Address 2562 Hylan Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

City	State	Zip Code
Staten Island	NY	10306-8689

Purpose of Disbursement
Postage

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: District:

Amount of Each Disbursement this Period

735.00

Transaction ID : B01DFADE7A23F43D783A

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Amazon.com

Mailing Address PO Box 81226

City	State	Zip Code
Seattle	WA	98108-1300

Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		29		2014

Amount of Each Disbursement this Period

339.38

Transaction ID : BD0FAED1647E645578E7

[MEMO ITEM]**B. ExxonMobil**

Mailing Address 231 Bay Street

City	State	Zip Code
Staten Island	NY	10301-3243

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		17		2014

Amount of Each Disbursement this Period

50.01

Transaction ID : B762FD01D5E0C46C9A05

[MEMO ITEM]**c. Staples**

Mailing Address 1885 Hylan Boulevard

City	State	Zip Code
Staten Island	NY	10305-2110

Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		21		2014

Amount of Each Disbursement this Period

50.35

Transaction ID : BE7620D144437441AAA4

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 25505

City	State	Zip Code
Lehigh Valley	PA	18002-5505

Purpose of Disbursement
Cell Phone Charges

001

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		23		2014

Amount of Each Disbursement this Period

289.46

Transaction ID : BB9A7F141C0654DE293D

[MEMO ITEM]

B. United States Postal Service

Mailing Address 2562 Hylan Boulevard

City	State	Zip Code
Staten Island	NY	10306-8689

Purpose of Disbursement
Postage

003

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		23		2014

Amount of Each Disbursement this Period

204.22

Transaction ID : B6DE9AA671D5049FD8B2

[MEMO ITEM]

C. BB&T

Mailing Address 1909 K Street NW

City	State	Zip Code
Washington	DC	20006-1152

Purpose of Disbursement
31.39

001

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		25		2014

Amount of Each Disbursement this Period

31.39

Transaction ID : B12FA91F52CF44E10852

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 650448

City	State	Zip Code
Dallas	TX	75265-0448

Purpose of Disbursement
Credit Card Charges

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2014

Amount of Each Disbursement this Period

2037.25

Transaction ID : BC382AAA848E447D3875

B. Sunoco

Mailing Address 700 South Avenue

City	State	Zip Code
Staten Island	NY	10303-1500

Purpose of Disbursement
Transportation

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

Amount of Each Disbursement this Period

78.00

Transaction ID : BEADA4261E32940F7A1D

[MEMO ITEM]

C. AT&T Mobility

Mailing Address PO Box 6463

City	State	Zip Code
Carol Stream	IL	60197-6463

Purpose of Disbursement
Cell Phone Charges

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2014

Amount of Each Disbursement this Period

304.39

Transaction ID : B425CFB478B3042628A4

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2037.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Sunoco

Mailing Address 579 92nd Street

City	State	Zip Code
Brooklyn	NY	11209-6413

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

75.00

Transaction ID : BA6D7CD2CE4BC43B29EA

[MEMO ITEM]**B. Shell Oil**

Mailing Address 1769 Arthur Kill Road

City	State	Zip Code
Staten Island	NY	10312-1339

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2014

Amount of Each Disbursement this Period

97.25

Transaction ID : B3977F0E2900D411AA8D

[MEMO ITEM]**c. United States Postal Service**

Mailing Address 2562 Hylan Boulevard

City	State	Zip Code
Staten Island	NY	10306-8689

Purpose of Disbursement
Postage

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2014

Amount of Each Disbursement this Period

24.99

Transaction ID : B8702262FF8634BACBFE

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Luke's Copy Shop

Mailing Address 2506 Hylan Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2014

City	State	Zip Code
Staten Island	NY	10306-4366

Purpose of Disbursement
Printing

006

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

185.08

Transaction ID : B9C2A8EB0100B49A9B8C

[MEMO ITEM]

B. Staples

Mailing Address 1885 Hylan Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

City	State	Zip Code
Staten Island	NY	10305-2110

Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

156.23

Transaction ID : B7FD23EA4D63F4F8BA20

[MEMO ITEM]

c. Richmond Operating LLC

Mailing Address 2990 Victory Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

City	State	Zip Code
Staten Island	NY	10314-6605

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

53.04

Transaction ID : B4701D168608443FA97B

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Orange32

Mailing Address 5017 5th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

City	State	Zip Code
Long Island City	NY	11101-5786

Purpose of Disbursement
Printing

006

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

762.12

Transaction ID : BCD15899214D14A67AEF

[MEMO ITEM]

B. Staples

Mailing Address 1885 Hylan Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

City	State	Zip Code
Staten Island	NY	10305-2110

Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

204.43

Transaction ID : B8FF350086E7D4B10B88

[MEMO ITEM]

c. Richmond Operating LLC

Mailing Address 2990 Victory Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		20		2014

City	State	Zip Code
Staten Island	NY	10314-6605

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

46.72

Transaction ID : BA1CB63365E2E449FB8E

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 650448

City	State	Zip Code
Dallas	TX	75265-0448

Purpose of Disbursement
Credit Card Charges

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

15024.39

Transaction ID : B6173D8D0E5064F57883

B. Luke's Copy Shop

Mailing Address 2506 Hylan Boulevard

City	State	Zip Code
Staten Island	NY	10306-4366

Purpose of Disbursement
Printing

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2014

Amount of Each Disbursement this Period

5552.63

Transaction ID : B96248CF764E74091BAF

[MEMO ITEM]

c. Orange32

Mailing Address 5017 5th Street

City	State	Zip Code
Long Island City	NY	11101-5786

Purpose of Disbursement
Online Fundraising

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

3153.00

Transaction ID : BFCDC6A8C85564E96B11

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

15024.39

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Richmond Operating LLC

Mailing Address 2990 Victory Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

City	State	Zip Code
Staten Island	NY	10314-6605

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

50.00

Transaction ID : B4F6B86C06796407B9D2

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AT&T Mobility

Mailing Address PO Box 6463

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2014

City	State	Zip Code
Carol Stream	IL	60197-6463

Purpose of Disbursement
Cell Phone Charges

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

165.75

Transaction ID : B8BD4D205278B4074A55

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. ExxonMobil

Mailing Address 231 Bay Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2014

City	State	Zip Code
Staten Island	NY	10301-3243

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

75.00

Transaction ID : B8A5951F7C96140C6AE5

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Inphonex.com LLC

Mailing Address 7206 NW 31st St

City	State	Zip Code
Miami	FL	33122-1216

Purpose of Disbursement
Internet Phone

001

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2014

Amount of Each Disbursement this Period

2275.13

Transaction ID : B0E3EA14D56624B9E8A3

[MEMO ITEM]

B. Amazon.com

Mailing Address PO Box 81226

City	State	Zip Code
Seattle	WA	98108-1300

Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2014

Amount of Each Disbursement this Period

87.96

Transaction ID : B985E7345A8B34AAFA7B

[MEMO ITEM]

c. Shell Oil

Mailing Address 1769 Arthur Kill Road

City	State	Zip Code
Staten Island	NY	10312-1339

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		19		2014

Amount of Each Disbursement this Period

75.08

Transaction ID : B63C2B673C4934D0B874

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 1885 Hylan Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		24		2014

City	State	Zip Code
Staten Island	NY	10305-2110

Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

72.69

Transaction ID : BA569ACEA0D884B1F842

[MEMO ITEM]**B. ExxonMobil**

Mailing Address 231 Bay Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2014

City	State	Zip Code
Staten Island	NY	10301-3243

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

75.01

Transaction ID : BCA3F2040BE4F4E5590A

[MEMO ITEM]**C. Hess**

Mailing Address 2488 Hylan Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2014

City	State	Zip Code
Staten Island	NY	10306-3144

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

200.00

Transaction ID : BC89FD84DB7EC436A8AD

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Lupo Verde

Mailing Address 1401 T St NW,

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

City	State	Zip Code
Washington	DC	20009-3905

Amount of Each Disbursement this Period

425.80

Purpose of Disbursement
Food & Beverage

003

Transaction ID : B3953562330794C8E80B

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 1885 Hylan Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

City	State	Zip Code
Staten Island	NY	10305-2110

Amount of Each Disbursement this Period

201.41

Purpose of Disbursement
Office Supplies

001

Transaction ID : BC1F8D9D98FB94F0B98A

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

c. The Home Depot

Mailing Address 545 Targee Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2014

City	State	Zip Code
Staten Island	NY	10304-3567

Amount of Each Disbursement this Period

226.62

Purpose of Disbursement
Office Supplies

001

Transaction ID : B3A92908D5C394FB7BCC

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 OF 49

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. ExxonMobil

Mailing Address 231 Bay Street

City State Zip Code
 Staten Island NY 10301-3243

Purpose of Disbursement
 Transportation

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 08 / 02 / 2014

Amount of Each Disbursement this Period

75.01

Transaction ID : B92829D7B20BC403086F

[MEMO ITEM]

B. Staples

Mailing Address 1885 Hylan Boulevard

City State Zip Code
 Staten Island NY 10305-2110

Purpose of Disbursement
 Office Supplies

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 08 / 05 / 2014

Amount of Each Disbursement this Period

15.37

Transaction ID : BE661947234574A4599A

[MEMO ITEM]

c. Shell Oil

Mailing Address 1769 Arthur Kill Road

City State Zip Code
 Staten Island NY 10312-1339

Purpose of Disbursement
 Transportation

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 08 / 08 / 2014

Amount of Each Disbursement this Period

71.23

Transaction ID : B0BAB74DF45254A2C857

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. United States Postal Service

Mailing Address 2562 Hylan Boulevard

City	State	Zip Code
Staten Island	NY	10306-8689

Purpose of Disbursement
Postage

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

Amount of Each Disbursement this Period

11.20

Transaction ID : B1F991B94E78C49F8B35

[MEMO ITEM]

B. Maryann's Flower Shop

Mailing Address 7413 13th Avenue

City	State	Zip Code
Brooklyn	NY	11228-2020

Purpose of Disbursement
Donation

012

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

Amount of Each Disbursement this Period

136.09

Transaction ID : B37EC09EBA75B48E9A11

[MEMO ITEM]

c. Richmond Operating LLC

Mailing Address 2990 Victory Boulevard

City	State	Zip Code
Staten Island	NY	10314-6605

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

Amount of Each Disbursement this Period

55.17

Transaction ID : BE715EBFAA19F4D37997

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Hess

Mailing Address 2488 Hylan Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		16		2014

City	State	Zip Code
Staten Island	NY	10306-3144

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

50.00

Transaction ID : B02284413E0CF4844A2C

[MEMO ITEM]**B. Verizon**

Mailing Address PO Box 15124

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		18		2014

City	State	Zip Code
Albany	NY	12212-5124

Purpose of Disbursement
Telephone

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

298.24

Transaction ID : B98DA03A3CD074F5DB84

[MEMO ITEM]**c. Hylan Hardware**

Mailing Address 2249 Hylan Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		21		2014

City	State	Zip Code
Staten Island	NY	10306-3228

Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

163.35

Transaction ID : BC0019C49B1BD4FFF99E

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 49

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

Full Name (Last, First, Middle Initial)

A. Richmond Operating LLC

Mailing Address 2990 Victory Boulevard

City	State	Zip Code
Staten Island	NY	10314-6605

Purpose of Disbursement
Transportation

002

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 21 / 2014

Amount of Each Disbursement this Period

56.13

Transaction ID : BEBB3C2F0804A4B02AE8

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Newegg.com

Mailing Address 17708 Rowland St

City	State	Zip Code
Rowland Heights	CA	91748-1119

Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 22 / 2014

Amount of Each Disbursement this Period

245.97

Transaction ID : BDE196FEAEB31488F905

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 650448

City	State	Zip Code
Dallas	TX	75265-0448

Purpose of Disbursement
Finance Charge

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 26 / 2014

Amount of Each Disbursement this Period

361.03

Transaction ID : BDF405AA2173C44C8A00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
307905.30

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 44 OF 49

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

231209.30

Transaction ID : D2988961BB7C3443AAE7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

231209.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

68790.70

Transaction ID : D7BEF04B3563C494486B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

68790.70

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City

State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

15443.90

Transaction ID : D547A9181CBD64C7181F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15443.90

1) **SUBTOTALS** This Period This Page (optional) ▶

315443.90

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 45 OF 49

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

1121.20

Transaction ID : DDC8CCBBBC4164F7CA3F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1121.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

1271.67

Transaction ID : DE2CE9E864FAF4D99BDB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1271.67

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City

State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

1414.90

Transaction ID : D0FDB249AF84D4BAE833

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1414.90

1) **SUBTOTALS** This Period This Page (optional) ▶

3807.77

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 46 OF 49

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

144.50

Transaction ID : DD6F2654A130649AF AE1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

144.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

405.80

Transaction ID : D6FB79D10B0BF4C5FA6B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

405.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City

State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

1745.00

Transaction ID : D1BB8A6B088914A6CBC8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1745.00

1) **SUBTOTALS** This Period This Page (optional) ▶

2295.30

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 47 OF 49

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

3281.80

Transaction ID : DCE31591FC9584568BC7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3281.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

1412.50

Transaction ID : DD9AA544CE5264D42802

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1412.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City

State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

9554.50

Transaction ID : D727E015E86B84DE2A97

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9554.50

1) **SUBTOTALS** This Period This Page (optional) ▶

14248.80

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 48 OF 49

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

39909.59

Transaction ID : D7CDDA70F8C7E40E995C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

39909.59

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

1772.60

Transaction ID : D7D867FCDADEF46D9A95

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1772.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City

State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

16000.00

Transaction ID : DC05DD2408F6A434CB2C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

16000.00

1) **SUBTOTALS** This Period This Page (optional) ▶

57682.19

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 49 OF 49

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

793.75

Transaction ID : DE65B1ABC23E9442B81F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

793.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

26315.50

Transaction ID : DA46422BCF9654E69AC4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

26315.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Patton Boggs

Nature of Debt (Purpose):

Legal Fees

Mailing Address 2550 M Street NW

City

State

Zip Code

Washington

DC

20037-1309

Outstanding Balance Beginning This Period

11201.20

Transaction ID : DB0238D11275F4333A11

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11201.20

1) **SUBTOTALS** This Period This Page (optional) ▶

38310.45

2) **TOTALS** This Period (last page this line number only) ▶

431788.41

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

431788.41